

U. S. Cost Reimbursable-

(Department, bureau, or establishment)

Voucher prepared at

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. 494

To

(Payee)

(Address)

(City)

(State)

PAID BY

(For use of Paying Office)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Cost				10,249.97	✓

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from to Weight Government B/L No. Total 10,249.97 ✓

I certify that the above bill is correct and just and that payment therefor has not been received.

(Payee must NOT use this space)

(Sign original only)

STATINTL

Date 9-29-55 #Payee

Account verified; correct for
(Signature or initials)

10,249.97

Contract No. A101 Date Req. No. Date Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for pay

Approved for \$ 10,249.97 STATINTL

By Richard M. Bissell, Jr.

SIGN
ORIGINAL
ONLY

10/14/55
Authorized Certifying Officer

STATINTL

STATINTL

Contracting Officer

Title Project Director

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (For completion by Administrative Office)

Appropriation, limitation, or project symbol	Appropriation title				Limit'n. or Proj't. Amount	Appropriation Amount
Allotment symbol	Amount	Obligations liquidated	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			Symbol	Amount	Symbol	Amount

Paid by { Check No. 10,381,985 dated 19 Oct 1955 for \$ 47,923.94 } on Treasurer of the United States in favor of payee named above.
Cash, \$ on 19 Payee
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$", and over his official title.

Per

Approved For Release 2000/04/12 : CIA-RDP84-00360R000400040019-4
Services Other Than Personal

CONTINUATION SHEET

U.S. Cost Reimbursable-

(Department, bureau, or establishment)

Sheet No. 1 of Bureau Voucher No. 86

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
STATINTL		<u>PAYROLL SYSTEM 3</u> Direct Labor Costs properly chargeable to Contract A101 for the period 9/19/55 thru 9/25/55. Week Ending 9/25/55 Overhead computed at interim rate of <u>OTHER COSTS</u> West Coast Pattern Ck.#12477 P.O.#8588	STATINTL			10,094.97 ✓	
						155.00 ✓	
						10,249.97 ✓	

INVOICE

TURBINE PUMP
PATTERNS

Approved For Release 2000/04/12 : CIA-RDP64-00360R000400040019-4



WEST COAST PATTERN CO., Inc.

PATTERNS AND MODELS IN WOOD OR METAL
RUBBER MOLDS • PERMANENT MOLDS
SHELL MOLD PATTERNS

5967 ALBANY STREET, HUNTINGTON PARK, CALIF.

SOLD TO

Ramo-Wooldridge Corp.,
8820 Bellanca Ave.,
Los Angeles 45, Calif.

INVOICE
DATE Aug. 26, 1955

INVOICE
No. 4083

CUSTOMER P.O. NO.	ORDER DATE	OUR JOB NO.	SHIP VIA	TERMS
8588	8/9/55	4083		This Invoice is Due & Payable not later than the tenth of the following month.
QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT	
	1 wood impedance model per dwg. \$50699012. Eng. change.	\$ 125.00 30.00 <u>155.00</u>		
	For resale.			
<div data-bbox="547 1434 896 1782" data-label="Form"> <p>Approved for <i>[initials]</i> Payment _____ Prices and <i>OK</i> Extensions _____ Paid 25-00-00 Account: 1023-A <i>06 #12477</i></p> </div>				

ORIGINAL

ACCOUNTING COPY

RECEIVING REPORT

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VENDOR West Coast Pattern Co.

DATE 8-22-55

SHIPPER " " " "

P. O. NO. 8588 (Req#10497)

REC'D VIA Telex Delivery

FREIGHT BILL NO.

PACKING SLIP NO. 4083

NO. OF CONTAINERS

[illegible]

REMARKS:

25-00-00

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VERIFIED
BY: